

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	12. G		3/31/00
O.I.P.E. CLASSIFIER		15083 10	4-4-00
FORMALITY REVIEW	SS		5 26 11
RESPONSE FORMALITY REVIEW	SS	15083	17 26 11

INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) ... Canceled  
 + ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
Final Original	
1	10/3/00
2	10/3/00
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Claim	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here

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